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January 17, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Confirmation No. 3820

Appl. No. : 10/694,068

First Named Inventor : Donald W. Howie

Filed : 10/27/2003

Title : Positioner and Method for a Femoral Hip Implant

TC/A.U. : 3738 Examiner : B. Snow

Atty. Docket No. : 0103-0035 (ZM0476)

Customer No. : 43231

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of 10/17/2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 12 of this paper.

01/24/2006 BABRAHA1 00000060 502779 10694068

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
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FEE TRANSMITTAL	For FY 2005	
s pursuant to the Consolidated Appropriations Act, 2005 (1.1.).	E TRANSMIT	TAL
a numerant to the Consolidated Appropriations Act. 2005 (H.P. 4818	to the Consolidated Appropriations Act, 200)5 (H.R. 4818).

Effective on 12/08/2004.

Applicant claims small entity status.	See 37	CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 400

Complete if Known			
Application Number	10/694,068	,	
Filing Date	10/27/2003	/	
First Named Inventor	Donald W. Howie	•	
Examiner Name	B. Snow		
Art Unit	3738		
Attorney Docket No.	0103-0035 (ZM0476)		

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METHOD OF PAYMENT (check all that apply)							
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FEE CALCULATION							
1. BASIC FILING, SEAR							
	FILING	FEES Small Entity		H FEES Small Entity		ATION FEES Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160 `	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEE Fee Description	ES					Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (i	including P	teissues)				50	25
Each independent cla			sues)			200	100
Multiple dependent cl	laims		·			360	180
Total Claims	Extra Clair		Fee P	Paid (\$)			pendent Claims
18 - 20 or HP =	O I claims paid fo	x 50	_=	<u>)</u>		Fee (\$)	Fee Paid (\$)
HP = highest number of total Indep. Claims	claims paid to Extra Clair			aid (\$)		360	0
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HP = highest number of indep			than 3.				
3. APPLICATION SIZE I		exceed 100 she	ets of nane	r (excluding (electronicall	ly filed seguer	ace or computer
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction th		35 U.S.C. 41(a	a)(1)(G) an	nd 37 CFR 1.1	16(s).		
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4. OTHER FEE(S) Non-English Specific		•	Il entity di	scount)			Fees Paid (\$)
Other (e.g., late filing surcharge):							

SUBMITTED BY					
Signature		Registration No. (Attorney/Agent) 35,334	Telephone 817-594-5994		
Name (Print/Type)	Cary R. Reeves		Date January 17, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.